2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006
Secretary of State

DOCUMENT# L05000122845

Entity Name: WOF ENTERPRISES, LLC

Current Principal Place of Business:

305 CARRIAGE OAK PLACE
SEFFNER, FL 335844743

New Principal Place of Business:

Current Mailing Address:

305 CARRIAGE OAK PLACE
SEFFNER, FL 335844743

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PANDOLFI, KRISTIN
2255 SOUTH PARKVIEW AVENUE
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

PANDOLFI, KRISTIN
2255 PARKVIEW AVENUE
ORANGE CITY, FL 32763 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 03/14/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: FOELKER, WILLIAM O
Address: 305 CARRIAGE OAK PLACE
City-St-Zip: SEFFNER, FL 335844743

Title: MGR ( ) Delete
Name: FOELKER, MARY ANN
Address: 305 CARRIAGE OAK PLACE
City-St-Zip: SEFFNER, FL 335844743

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM O FOELKER MGR 03/14/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date